

Exhibit B

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. ANTONIO J MANATA ADDRESS: 315 WESTFIELD AVE CLARK NJ 07066-0000					
0714	S	2018	013511						
<small>COURT CODE</small>	<small>PREFIX</small>	<small>YEAR</small>	<small>SEQUENCE NO.</small>						
NEWARK MUNICIPAL COURT 31 GREEN STREET NEWARK NJ 07102-0000 973-733-6520 COUNTY OF: ESSEX				DEFENDANT INFORMATION SEX: M EYE COLOR: BROWN DOB: 06/06/1975 DRIVER'S LIC. # M03810547106752 DL STATE: NJ SOCIAL SECURITY # xxx-xx-x854 SBI #: TELEPHONE #: () LIVESCAN PCN #:					
<small># of CHARGES</small>	<small>CO-DEFTS</small>	<small>POLICE CASE #:</small>							
1		18-42702							
COMPLAINANT N L GREEN NAME: 22 FRANKLIN ST ATTN RECORD BUREAU NEWARK NJ 07102									
By certification or on oath, the complainant says that to the best of his/her knowledge, information and belief the named defendant on or about 08/20/2018 in NEWARK CITY , ESSEX County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, COMMIT THE ACT OF SIMPLE ASSAULT, SPECIFICALLY BY STRIKING VICTIM IN THE FACE WITH A CLOSED FIST, CAUSING VICTIM TO LOSE 4 TEETH FROM THE FRONT OF HIS MOUTH. IN VIOLATION OF 2C:12-1A(1).									
in violation of: <table style="width:100%; border: none;"> <tr> <td style="border: none; width: 25%;">Original Charge</td> <td style="border: none; width: 45%;">1) 2C:12-1A(1)</td> <td style="border: none; width: 25%;">2)</td> <td style="border: none; width: 5%;">3)</td> </tr> </table>						Original Charge	1) 2C:12-1A(1)	2)	3)
Original Charge	1) 2C:12-1A(1)	2)	3)						
Check ✓	Certification by Police Regarding Complaint-Summons								
	I certify that I served the complaint-summons by delivering a copy to the defendant personally.								
	I certify that I personally served the complaint-summons by leaving a copy at the defendant's usual place of abode with a competent member of the household of the age 14 or over _____ <small>Name of family member over 14 years of age</small>								
	I certify that I mailed a copy of the complaint-summons by ordinary mail to the defendant at his or her last known address. _____ <small>Defendant's last known address</small>								
	I certify that I served the complaint-summons by delivering a copy to a person authorized to receive service of process on the defendant's behalf. _____ <small>Name and title of authorized person</small>								
	Other manner of service: I certify that I served the complaint-summons in the following manner: _____								
✓	I certify that I was unable to serve the complaint-summons.								
Signed: N L GREEN NEWARK CITY POLICE DEPT Date of Action: 08/28/2018 <small>Name, Title and Department of Officer</small>									
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